City of Milwaukee

REQUEST FOR PROMOTION WITHOUT COMPETITIVE EXAMINATION (RULE IV, SEC 9)

INSTRUCTIONS: Complete appropriate sections of this form. Retain one copy for your records. Send original and a copy to DER, Room 706, City Hall. Upon DER approval, the copy will be used as a personnel requisition and a Notice of Appointment will be sent to your Payroll section. Please attach additional sheets if necessary.

DEPT/DIVISION		DATE				
	PROMOT	TION REQUESTED FOR				
LAST NAME FIRST	NAME	INITIAL				
EMPLOYEE ID #	RACE		GENDER			
PRESENT TITLE PAY RANG	GE GRADE					
REQUESTED TITLE PAY RANG	E CRADE		EEO JOB GROUP			
REQUESTED TITLE	E GRADE		EEO JOB GROOT			
DDS WAYS IN COMPENS		TO D COMMISSION ADDIVIS DATE (DV	CUINT MINO			
PREVIOUS INCUMBENT F&P COMP		&P COMMISION APPVL. DATE (EX	IMISION APPVL. DATE (EXCEPT MPS)			
WHY AND HOW WAS THIS EMPLOYEE SELECTED FOR PROMOTION?						
OTHER PERSONS IN DEPARTMENT ELIGIBLE FOR POSITION BASED ON LAST ANNOUNCED REQUIREMENTS TOTAL ELIGIBLE NO. OF MINORITIES NO. OF FEMALES						
	No. of Minoria		NO. OF PENIALES			
DIPLOMAS, DEGREES RECEIVED						
ADDITIONAL JOB-RELATED EDUCATION, TRAINING IN PAST FIVE YEARS						
WORK EXPERIENCE SUPPORTING REQUESTED PROMOTION						
IS THE PERSON BEING CONSIDERED FOR APPOINTMENT RELATED BY BLOOD OR MARRIAGE TO A DIRECT SUPERVISOR?						
□YES □ NO IF YES, EXPLAIN RELATIONSHIP						
REPORTING OFFICER	SIGNATURE		TITLE			
APPROVING OFFICER	CICNIATURE		TOTAL E			
APPROVING OFFICER	SIGNATURE		TITLE			